

EMSAM PA SUMMARY

STATUS: Non-Preferred

LENGTH OF AUTHORIZATION: 1 year

NOTE: *Emsam is only approvable for patients 18 years old or older*

PA CRITERIA:

- ❖ Approvable for members with major depressive disorders who have failed on at least two SSRIs (i.e. Fluoxetine, Prozac, Fluvoxamine, Luvox, paroxetine, Paxil, Paxil CR, Pexeva, citalopram, Celexa, Lexapro, Zoloft) and one SNRI (i.e. Effexor, Effexor XR, Cymbalta) in the past 365 days.

EXCEPTIONS:

- ❖ Exceptions to these conditions of coverage are considered through the prior authorization process.
- ❖ The Prior Authorization process may be initiated by calling **Express Scripts at 1-877-650-9340**.

PA and APPEAL PROCESS:

- ❖ For online access to the PA process please click [here](#).

QUANTITY LEVEL LIMITATIONS:

- ❖ For online access to the current Quantity Level Limit please select Pharmacy Services from the manuals listed [at this link](#).